RECEIVED CENTRAL FAX CENTER

APR 0 7 2010

ROCKEY, DEPKE & LYONS, LLC

233 S. WACKER DRIVE, SUITE 5450 CHICAGO, ILLINOIS 60606 Pit: (312) 277-2006 FX: (312) 441-0570

	FACSIMILE II	<u>RANSMI</u>	SSIUN,	
TOTAL PAGES	(Including Cover Page) 12	DATE:_	4/6/2010	
	oner of Patents and Tradem : Jannelle M Lebron	arks	FROM: Robert J. Depke.	Reg. No. 37,607
FAX NO: (571) 273-8300			MAIN FAX NO.: ALTERNATE FAX NO:	
If you experience	ce any difficulty with this tran	smission, p	olease call (312) 277-2000	ô for assistance.
			AIL COURIER	
NOTES:		\$2.00 A (10)	CATION OF FACSIME INVASASSION	
nventor: Soichi Kuwahara Serial No.: 10/524,398 Art Unit: 2861	10/524,398 2861		Camp that this paper is being this in the part of the	77.72.5 /
Filed: Attomey Ref.:	February 11, 2005 075834.00506		Robert Depke/	

IMPORTANT NOTICE

This transmission (including all attached pages) is intended only for the use of the named addressee(s), and may contain information that is privileged or exempt from disclosure under applicable law. IF YOU ARE NOT A NAMED ADDRESSEE, YOU ARE HEREBY NOTIFIED THAT ANY USE, DISSEMINATION, DISTRIBUTION OR COPYING OF THIS TRANSMISSION IS STRICTLY PROHIBITED. If you have received this transmission in error, please destroy all copies and notify us immediately at this telephone number: (312) 277-2006.

APR 0 7 2010

PTO/SB/21 (69-04)
Approved for use through 07/31/2008, OMB 0651-0031
at and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no	persons are required to respond to a coll Application Number	action of information unless it displays a valid OMB control number.				
		10/524,398				
TRANSMITTAL	Filing Date	Feb 11, 2005				
FORM	First Named Inventor	Soichi Kuwahara				
	Art Unit	2861				
(to be used for all correspondence after Initial filing	Examiner Name	Jannelle M Lebron				
	Attorney Docket Number	075834.00506				
Total Number of Pages in This Submission						
ENCLOSURES (Check all that apply)						
Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts a		Status Letter Other Enclosure(s) (please Identify below): Form PTO/SB/D8a, and a cited reference. is hereby authorized to charge redit any overpayment				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT						
Firm Name Rockey, Depke & Lyons, LLC		1				
Signature						
Printed name Robert J. Depke						
Date 4/(/2.0/1) Reg. No. 37,607						
CERTIFICATE OF TRANSMISSION/MAILING						
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450. Alexandria, VA 22313-1450 on the date shown below:						
Signature						
Typed or printed name Robert J. Depke Date 4/6/20/0						

This collection of information is required by \$7 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by \$5 U.S.C. 122 and \$7 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form addor suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1460.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.